

**UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)**

Charitta Burt, Paralegal

U. S. Application No. \_\_\_\_\_

Publication Date \_\_\_\_\_

Publication No. WO \_\_\_\_\_ / \_\_\_\_\_ PCT/RO/101 \_\_\_\_\_

Copy of ISR \_\_\_\_\_, Copy of IPER \_\_\_\_\_

Assignee information: \_\_\_\_\_

Priority Info: Country \_\_\_\_\_ No. \_\_\_\_\_ date \_\_\_\_\_ MORE (turn over)

Correspondence checked: 25875

Inventor Name checked: F \_\_\_\_\_ L \_\_\_\_\_

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT \_\_\_\_\_ / \_\_\_\_\_ Language \_\_\_\_\_

Copy of ISR: \_\_\_\_\_

Copy in International Application: \_\_\_\_\_; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ spec. page no. \_\_\_\_\_

371 Filing Fees: \_\_\_\_\_; meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 45 Chargeable 58 Independent 9 multiple yes

Number of drawing Sheets: \_\_\_\_\_ Foreign language: \_\_\_\_\_

Oath/Declaration: \_\_\_\_\_; signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed \_\_\_\_\_

Small entity fee: \_\_\_\_\_; SME papers: yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

References \_\_\_\_\_,

Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_

Preliminary Amendment(s): ✓ date: \_\_\_\_\_; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: \_\_\_\_\_

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: ✓ forwarded to Assignment branch date: 5/13/05

Priority Document(s): \_\_\_\_\_ date \_\_\_\_\_; Number of copies included \_\_\_\_\_

Power of Attorney: \_\_\_\_\_

Abstract: \_\_\_\_\_, Article 19 Amendment: 103; replaced by Article 34 Amdt. \_\_\_\_\_

Date of 35 USC Receipt of Request: 9/28/04 Notes: \_\_\_\_\_

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: \_\_\_\_\_

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_; Petition 1.47: \_\_\_\_\_

Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_